

JC548 U.S. PTO
03/25/99

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PTO/SB/05 (2/98)
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	081862.P123	
First Inventor or Application Identifier		Henry Fourie
Title	Call Record Management for High Capacity Switched Virtual Circuits	
Express Mail Label No.	EM560888573US	

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification Total Pages 24 (preferred arrangement set forth below)</p> <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 CFR 113) Total Sheets 5</p> <p>4. Oath or Declaration Total Pages </p> <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (Indicate this is with Box 16 completed) <i>[Note Box 5 below]</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 	<p>5. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies
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ACCOMPANYING APPLICATION PARTS

<p>7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>8. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</p> <p>9. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO - 1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>11. <input type="checkbox"/> Preliminary Amendment</p> <p>12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>13. <input type="checkbox"/> *Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, Status still proper and desired</p> <p>14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>15. <input type="checkbox"/> Other:</p>	
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**NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).*

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

Continuation Divisional Continuation-in-part (CIP) of prior application No: _____ / _____

Prior application Information: Examiner _____ Group/Art Unit: _____

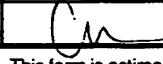
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label Correspondence address below
(Insert Customer No. or Attach bare code label here)

Name	BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP			
Address	12400 Wilshire Boulevard, Seventh Floor			
City	Los Angeles	State	California	Zip Code
Country	U.S.A.	Telephone	(310) 207-3800	Fax
(310) 820-5988				

Name (Print/Type)	Anand Sethuraman, Reg. No. 43,351	
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Signature		
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Date	3/25/99
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Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL

Patent fees are subject to annual revision on October 1.
 These are the fees effective October 1, 1997.
 Small Entity payments must be supported by a small entity statement,
 otherwise large entity fees must be paid. See Forms PTO/SB/09-12.
 See 37 C.F.R. §§ 1.28 and 1.29.

TOTAL AMOUNT OF PAYMENT (\$)

874.00

Complete if Known

Application Number	
Filing Date	03/25/99
First Named Inventor	Henry Fourie, et al.
Examiner Name	
Group Art Unit	
Attorney Docket Number	081862.P123

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account

Deposit Account

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance.

2. Payment Enclosed:

Check Money Order Other

FEE CALCULATION (fees effective 10/01/96)

1. FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	760	201	380	Utility filing fee	\$760
106	310	206	155	Design filing fee	
107	480	207	240	Plant filing fee	
108	760	208	380	Reissue filing fee	
114	150	214	75	Provisional filing fee	
SUBTOTAL (1)				(\$)	760.00

2. EXTRA CLAIM FEES

Total Claims	-20**	=	2	X	\$18.00	=	36.00	Fee from Extra Claims below	Fee Paid
Independent Claims	4	-3**	=	1	X	\$78.00	=	78.00	
Multiple Dependent									

* or number of previously paid, if greater; For Reissues, see below

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	78	202	39	Independent claims in excess of 3
104	270	204	135	Multiple Dependent claim
109	78	209	39	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)				(\$)
				114.00

3. ADDITIONAL FEE

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65 Surcharge - late filing fee or oath	
127	50	227	25 Surcharge - late provisional filing fee or cover sheet	
139	130	139	130 Non-English specification	
147	2,520	147	2,520 For filing a request for reexamination	
112	920	112	920 Requesting publication of SIR prior to Examiner action	
113	1,840	113	1,840 Requesting publication of SIR after Examiner action	
115	110	215	55 Extension for response within first month	
116	380	216	190 Extension for response within second month	
117	870	217	435 Extension for response within third month	
118	1,360	218	680 Extension for response within fourth month	
128	1,850	228	925 Extension for response within fifth month	
119	300	219	150 Notice of Appeal	
120	300	220	150 Filing a brief in support of an appeal	
121	260	221	130 Request for oral hearing	
138	1,360	138	1,360 Petition to institute a public use proceeding	
140	110	240	55 Petition to revive - unavoidably	
141	1,210	241	605 Petition to revive - unintentionally	
142	1,210	242	605 Utility issue fee (or reissue)	
143	430	243	215 Design issue fee	
144	580	244	290 Plant issue fee	
122	130	122	130 Petitions to the Commissioner	
123	50	123	50 Petitions related to provisional applications	
126	240	126	240 Submission of Information Disclosure Stmt	
581	40	581	40 Recording each patent assignment per property (times number of properties)	
146	760	246	380 Filing a submission after final rejection (37 CFR 1.129(a))	
149	760	249	380 For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (specify) _____				
Other fee (specify) _____				

SUBTOTAL (3) (\$)

Reduced by Basic Filing Fee Paid

SUBMITTED BY

Complete (if applicable)

Typed or Printed Name

Anand Sethuraman, Reg. No. 43,351

Reg. Number

Signature

Date

3/25/99

Deposit Account

User ID

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